



Atty. Dkt. No. 030231-0156

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Chaim SPRINGER et al.  
Title: DIAGNOSTIC MICROSPHERES  
Application No.: 10/522,200  
International Filing Date: 07/03/2003  
371(c) Date: 04/22/05  
Examiner: Jean Cornet  
Art Unit: 1628  
Confirmation No.: 8842

**REQUEST FOR CONTINUED EXAMINATION (RCE)**  
**TRANSMITTAL**

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. § 141, or the commencement of a civil action under 35 U.S.C. § 145 or § 146 (unless the appeal or civil action is terminated).

**Submission required under 37 C.F.R. § 1.114**

Enclosed is a Submission Under 37 C.F.R. § 1.114.

06/22/2010 SMOHAMME 00000001 10522200

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405.00 OP

The filing fee is calculated below:

|  | Claims as Amended | Previously Paid For | Extra Claims Present | Rate            | Fee Totals        |
|--|-------------------|---------------------|----------------------|-----------------|-------------------|
| <b>RCE Fee 1.17(e):</b>                              |                   |                     |                      | <b>\$810.00</b> | <b>= \$810.00</b> |
| Total Claims:  | 7                 | - 20                | = 0                  | x \$52.00       | = \$0.00          |
| Independents   | 2                 | - 3                 | = 0                  | x \$220.00      | = \$0.00          |
| First presentation of any Multiple Dependent Claims: |                   |                     |                      | + \$390.00      | = \$0.00          |
| <b>CLAIMS FEE TOTAL:</b>                             |                   |                     |                      |                 | <b>= \$810.00</b> |

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

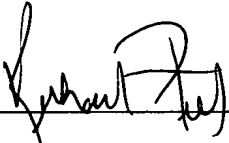
|  |                 |   |                 |
|--|-----------------|---|-----------------|
| <input type="checkbox"/> Extension for response filed within the first month:                    | \$130.00        | 0 | \$0.00          |
| <input checked="" type="checkbox"/> <b>Extension for response filed within the second month:</b> | <b>\$490.00</b> |   | <b>\$490.00</b> |
| <input type="checkbox"/> Extension for response filed within the third month:                    | \$1,110.00      |   | \$0.00          |
| <input type="checkbox"/> Extension for response filed within the fourth month:                   | \$1,730.00      |   | \$0.00          |
| <input type="checkbox"/> Extension for response filed within the fifth month:                    | \$2,350.00      |   | \$0.00          |
| EXTENSION FEE SUBTOTAL:  |                 |   | \$490.00        |
| EXTENSION FEE ALREADY PAID: -  |                 |   | \$0.00          |
| EXTENSION FEE TOTAL  |                 |   | \$490.00        |
| CLAIMS AND EXTENSION FEE TOTAL:  |                 |   | \$1300.00       |
| <input checked="" type="checkbox"/> <b>Small Entity Fees Apply (subtract ½ of above):</b>        |                 |   | <b>\$650.00</b> |
| <input type="checkbox"/> Suspension of action requested under 37 C.F.R. § 1.103(c)               |                 |   | \$0.00          |
| TOTAL FEE:   |                 |   | \$650.00        |

**A credit card payment form in the amount of \$650.00 to cover the RCE filing fee and a Petition for two month extension of time is enclosed.**

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By  \_\_\_\_\_

Richard Peet  
Attorney for Applicant  
Registration No. 35,792

Date June 21, 2010 (Monday)

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